

consolation to those who have suffered the unfortunate circumstances associated with birth defects. But perhaps it will encourage us to expend more effort in preventing birth defects in any child”(2).

Edward N. Brandt, Jr., MD, PhD
Assistant Secretary for Health

References

1. Erickson, J.D., et al.: Vietnam veterans' risks for fathering babies with birth defects. *JAMA* 252: 903-912, Aug. 17, 1984.
2. Dan, B. B.: Vietnam and birth defects [Editorial]. *JAMA* 252: 936-937, Aug. 17, 1984.

LETTERS TO THE EDITOR

Erratum in “The Population Attributable Risk of Hypertension from Heavy Alcohol Consumption”

In reading our paper, by E. B. Larbi, J. Stamler, et al., *Public Health Reports* for May-June, 1984, pages 316-319, we note a formulation in the first sentence of the last paragraph, on page 318, that is inaccurate and meriting correction. Specifically, that first sentence should read: Moreover, if it is assumed, as has been found in several studies, that the relationship of alcohol use and blood pressure is continuous (curvilinear), then in countries such as the United States, where the per capita consumption is high (26, 27), the population at risk of alcohol-related hypertension is enormous.

This correction is necessary, since the sets of data available do *not* indicate a linear relationship (as stated in our original report), but a continuous curvilinear one.

We would appreciate your printing this correction.

Let me make it clear that the inappropriate formulation was ours and not the responsibility of *Public Health Reports*.

Jeremiah Stamler, MD
Professor and Chairman
Dingman Professor of Cardiology
Northwestern University
The Medical School
Chicago, Ill. 60611

Smoking, Sex, and Longevity over 60 Years

In considering the differences of opinion between Dr. Miller and Dr. Gerstein on the one hand (1,2) and Dr. Feinleib and Dr. Luoto on the other (3), I find it useful to look at the mortality of males and females over as long a period as possible.

In Florida, the excess of age-adjusted death rates of males over females among whites was 14 percent in 1920, 34 percent in 1930, 53 percent in 1950, 70 percent in 1960, 83 percent in 1970, and 87 percent in 1980. The figures and the trend in the United States as a whole have been about the same. In the case of nonwhites, the trend has been the same. The differences in the mortality rates between the sexes, though less, have progressively approached the differences in whites.

If the differences in smoking habits are responsible for the differences in male and female mortality, then the difference in smoking habits of men and women should be more or less parallel during this 60-year period. Actually, the smoking (and drinking) habits of women seem to have approached those of men over this period. And, as more and more women have entered the workforce, their risk of death from accidents has increased.

A look at the mortality rates of two undoubtedly nonsmoking-age groups suggests that there are other factors involved. In the white population of the United States in 1950, in the age group under 1 year the male death rate was 34.0 per 1,000 population as compared to 25.7 for females, an excess of 32 percent. In the age group of 1-4, the excess was 27 percent.

Although there can be no reasonable doubt that smoking contributes heavily to the excess mortality of men over women, I doubt that “present differences in longevity between men and women will disappear” if their smoking habits become the same (4).

Wilson T. Sowder, MD, MPH
Medical Director, retired,
Public Health Service
Former State Health Officer,
Florida
Former editorial board member,
Public Health Reports
Jacksonville, Fla.

References

1. Miller, G. H., and Gerstein, D. R.: The life expectancy of nonsmoking men and women. *Public Health Rep* 98: 343-349, July-August 1983.
2. Miller, G. H., and Gerstein, D. R.: Others would get similar longevity results if they took greater care [letter to editor]. *Public Health Rep* 99: 223-224, May-June 1984.
3. Feinleib, M., and Luoto, J. L.: Longevity of nonsmoking men and women [letter to editor]. *Public Health Rep* 99: 223, May-June 1984.
4. Sowder, W. T.: Why is the sex difference in mortality increasing? *Public Health Rep* 69: 860-864, September 1954.